### **Application Data Sheet**

### **Application Information**

Application Type::

Regular

Subject Matter::

Utility

Suggested Group Art Unit::

2876

Suggested Classification::

235/379

Title::

CASH DISPENSING AUTOMATED BANKING

MACHINE WITH DEPOSIT HOLDING CONTAINER

Attorney Docket Number::

D-1221 R6

Request for Early Publication?::

Request for Non-Publication?:: No

Suggested Drawing Figure::

112

No

Total Drawing Sheets::

97

Small Entity::

No

Petition included?::

No

Secrecy Order in Parent Appl.?:: No

#### **Applicant Information**

Applicant Authority Type::

Inventor

Primary Citizenship Country::

US

Status::

**Full Capacity** 

Given Name::

Jeffrey

Middle Name::

Family Name::

Eastman

Name Suffix::

City of Residence::

North Canton

State or Province Of Residence:: OH

Country of Residence::

US

Street of mailing address::

2152 Mohler Drive NW

City of mailing address::

North Canton

State or Province of mailing address::

OH

Country of mailing address::

US

Postal or Zip Code of mailing address::

44720

#### **Applicant Information**

Applicant Authority Type::

Inventor

Primary Citizenship Country::

US

Status::

Full Capacity

Given Name::

William

Middle Name::

D.

Family Name::

Beskitt

Name Suffix::

City of Residence::

Canton

State or Province Of Residence:: OH

Country of Residence::

US

Street of mailing address::

4817 Meadowlane Drive

City of mailing address::

Canton

State or Province of mailing address::

OH

Country of mailing address::

US

Postal or Zip Code of mailing address:: 44709

### **Applicant Information**

Applicant Authority Type::

Inventor

Primary Citizenship Country::

US

Status::

**Full Capacity** 

Given Name::

Н.

Middle Name::

**Thomas** 

Family Name::

Graef

Name Suffix::

City of Residence::

Bolivar

State or Province Of Residence:: OH

Country of Residence::

US

Street of mailing address::

P.O. Box 287

City of mailing address::

Bolivar

State or Province of mailing address::

OH

Country of mailing address::

US

Postal or Zip Code of mailing address:: 44612

# **Correspondence Information**

Correspondence Customer Number::

28995

## **Representative Information**

Representative Customer Number:	28995
1 1	

## **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Date Filing::
This Application	An application claiming	60/453,667	03/10/2003
	the benefit under 35		
	USC 119(e)		

## **Assignee Information**

Assignee Name::

Diebold Self-Service Systems

Division of Diebold, Incorporated

City of mailing address::

North Canton

State or Province of mailing address::

OH